	Cas	se 24-3	0422			Entered 12/13/2		Des	с Ех	hibit	
Form	10	65		U.S.2	ReturnxoRPta	rtner <mark>ship</mark> lh c óm	e		OMB	No. 1545-0123	
· OIIII	IU	JUJ	For ca	llendar year 2022, or tax ye	ear beginning	, 2022, ending	, 20		4	2022	
		he Treasury				structions and the latest			4	2022	
		e Service ness activity		Name of partnership		on donone and the latest	· ·····o················		D Emple	yer identification number	
A	oipai baoii	icoo dolivity		JAMIESON CAPEX	FIIND LLC				D Limpic	yer racinimoanon namber	
INVI	ESTME	NT		OTHER DON CHILD	TOND LLC				47-	3653978	
		uct or service	Туре	Number, street, and room or s	uite no. If a P.O. box, see ir	nstructions.				business started	
INVI	ESTME	NT	or Print	3680 54TH STREE	T SOUTH				01-01-2016		
C Bus	ness code	number		City or town, state or province,	, country, and ZIP or foreigr	n postal code			F Total	assets instructions)	
									(300	man detions)	
531				FARGO, ND 58104	_				\$	6,895,582	
		licable box		` ' — `	2) Final return	· · =	(4) Address ch	nange ((5)	Amended return	
		ounting me		—	2) X Accrual	(3) U Other (specify):					
						at any time during the tax y					
				_		c purposes (2) Groupe					
						rough 22 below. See the				donvity purposes	
				ales			1a				
			•	nces			1b				
	с	Balance. Si	ubtract li	ine 1b from line 1a					lc		
4	2 (Cost of goo	ds sold	(attach Form 1125-A) .					2		
Income	3 (Gross profi	t. Subtra	act line 2 from line 1c .					3		
ည	4 (Ordinary in	come (lo	oss) from other partnershi	ips, estates, and trus	ts (attach statement) . st	atement.#1.		4	(55,722)	
-	5 I	Net farm pr	ofit (loss	s) (attach Schedule F (Fo	orm 1040))				5		
	6 I	Net gain (lo		6							
		Other incon		7	10,473						
		Total incor		8	(45,249)						
(S)	9 :	Salaries an	_	9							
instructions for limitations)		Guaranteed		10							
ii.		Repairs and		11	25,220						
for l		Bad debts							12		
ons	_	Rent		_	13	1,970					
ructi		Taxes and I		14	6,652						
inst		nterest (se	• • 📙	15	277,624						
ees)				uired, attach Form 4562) eported on Form 1125-A			6a 6b	1	6c		
									17		
<u>io</u>					•				18		
ğ									19		
Deductions			•	· ·					20	148,859	
				· ·		mn for lines 9 through 20.			21	460,325	
									22	(505,574)	
	23	nterest due	under t	the look-back method - c	ompleted long-term o	contracts (attach Form 869	97)		23		
ŗ	24	nterest due	under t	the look-back method - ir	2	24					
J.	25 I	BBA AAR	imputed	underpayment (see instr	2	25					
ag	26	Other taxes	(see ins	structions)					26		
and Payment				-					27		
ā			see instructions)								
Tax						owed			29		
	30					nt			30		
		and belief,	it is true,	correct, and complete. Dec	examined this return, in laration of preparer (oth	ncluding accompanying sched er than partner or limited liabi	iules and statements, ility company membel	and to the s based)	e best of d on all i	my knowledge nformation of	
Sign	1	which prep	arer has	any knowledge.					100 1		
Here	е	DD T-	NT 170-	INOUGEV.				with th	e nrena	iscuss this return rer shown below?	
		-		JNOVSKY er or limited liability company	v memher			See in	struction	IS. X Yes No	
		Print/Type			Preparer's signature	Date	Date	Check	□ if	PTIN	
Paid		Kyle P			Kyle Pender	CPA	10-13-2023	self-em	_	P00730600	
Prep	arer	Firm's nam		Montgomery & Per	· -		120 13-2023	Firm's E	-	45-0455434	
Use		Firm's add		5630 34th Ave S				0		0100101	
	,			Fargo, ND 58104				Phone i	no. (7 0	1)281-8001	

Case 24-30422 Doc 63-3 Filed 12/13/24 Entered 12/13/24 19:01:34 Desc Exhibit C - 2022 Tax Return Page 2 of 8

Form 1	065 (2022) JAMIESON CAPEX FUND LLC					47-36	553978	F	Page 2
Sch	edule B Other Information								
1	What type of entity is filing this retum? Check the applica	able box:						Yes	No
а	☐ Domestic general partnership b	☐ Dor	mestic limited p	artnership					
С	X Domestic limited liability company d Domestic limited liability partnership								
е	Foreign partnership f	Oth	er:						
2	At the end of the tax year:	<u> </u>							
а	Did any foreign or domestic corporation, partnership (inc	cluding any	entity treated	as a partners	ship), tru	st, or tax-			
	exempt organization, or any foreign government own, dir	•							
	loss, or capital of the partnership? For rules of construct		•						
	B-1, Information on Partners Owning 50% or More of the	e Partners	ship						Х
b	Did any individual or estate own, directly or indirectly, ar	n interest o	of 50% or more	in the profit,	loss, or	capital of			
	the partnership? For rules of constructive ownership, see	e instructio	ns. If "Yes," att	ach Schedule	B-1, Int	formation			
	on Partners Owning 50% or More of the Partnership .								Х
3	At the end of the tax year, did the partnership:								
а	Own directly 20% or more, or own, directly or indirectly,	50% or m	ore of the total	voting powe	r of all cl	asses of			
	stock entitled to vote of any foreign or domestic corpora	tion? For r	ules of constru	ctive ownersh	nip, see i	nstructions.			
	If "Yes," complete (i) through (iv) below								х
	(i) Name of Corporation		(ii) Employer I) Country of	(iv) Perc		
			Number	(if any)	ı	ncorporation	Owned in Voti	ing Stoc	k
b	Own directly an interest of 20% or more, or own, directly	or indired	tly, an interest	of 50% or mo	ore in the	e profit, loss,			
	or capital in any foreign or domestic partnership (includir	ng an entit	y treated as a p	partnership) o	or in the	beneficial			
	interest of a trust? For rules of constructive ownership, s	_							х
	(i) Name of Entity		Employer	(iii) Type	e of	(iv) Country of		Maximur	
	(i) Name of Entity		dentification Imber (if any)	Entity		Organization	Percenta Profit, Los		
		- 110	bo. (ii di.iy)				1 10111, 200	, o, o	pilai
	Describe a set continue of the III from a fitter fall and a							V	N1 -
4	Does the partnership satisfy all four of the following co							Yes	No
а	The partnership's total receipts for the tax year were less								
b	The partnership's total assets at the end of the tax year								
С	Schedules K-1 are filed with the return and furnished to	the partne	rs on or before	the due date	(includi	ng extensions)			
	for the partnership return.								
d	The partnership is not filing and is not required to file So	hedule M-	3						х
	If "Yes," the partnership is not required to complete Scho	edules L, I	M-1, and M-2; i	tem F on pag	e 1 of F	orm 1065;			
	or item L on Schedule K-1.								
5	Is this partnership a publicly traded partnership, as defin	ed in secti	on 469(k)(2)?	<u></u>		<u>.</u>	<u>.</u>		х
6	During the tax year, did the partnership have any debt the								
	so as to reduce the principal amount of the debt?						. 		x
7	Has this partnership filed, or is it required to file, Form 89								
-									х
8	At any time during calendar year 2022, did the partnersh								
•	a financial account in a foreign country (such as a bank								
	See instructions for exceptions and filing requirements for								
	Financial Accounts (FBAR). If "Yes," enter the name of			•			<u></u> .		х
9	At any time during the tax year, did the partnership received		•				_		
	to, a foreign trust? If "Yes," the partnership may have to		*	ŭ					
	Foreign Trusts and Receipt of Certain Foreign Gifts. See		· ·						х
10a	Is the partnership making, or had it previously made (an								X
iva	See instructions for details regarding a section 754 elect		, a section	, o- CICCHOII	. 				_
h			ment under een	tion 742/h) ~	r 721/h\	2 If "Vec "			
b	Did the partnership make for this tax year an optional ba	•		. ,	. ,				
	attach a statement showing the computation and allocati								Х
С	Is the partnership required to adjust the basis of partners								
	substantial built-in loss (as defined under section 743(d)								
	734(d))? If "Yes" attach a statement showing the comple	itation and	allocation of the	ne hasis adius	stment S	See instructions		I	v

EEA Form **1065** (2022)

Case 24-30422 Doc 63-3 Filed 12/13/24 Entered 12/13/24 19:01:34 Desc Exhibit C - 2022 Tax Return Page 3 of 8

	1065 (2022) JAMIESON CAPEX FUND LLC	47-3653978	ŀ	² age 3					
Sch	edule B Other Information (continued)			ı					
11	Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-		Yes	No					
	kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the	е							
	partnership throughout the tax year)	<u></u>							
12	At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other								
	undivided interest in partnership property?			х					
13	If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect To Foreign								
	Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See								
	instructions								
14	Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's								
	Information Statement of Section 1446 Withholding Tax, filed for this partnership								
15	Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached	t							
	to this return	0							
16 a	Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions			х					
b	If "Yes," did you or will you file required Form(s) 1099?								
17	Enter the number of Forms 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporat								
	attached to this return	,							
18	Enter the number of partners that are foreign governments under section 892								
19	During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042								
	and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?			x					
20	Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions								
20				v					
21	for Form 8938			X					
21		· · · · · · · · · · · · · · · · · · ·		X					
22	During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are								
	not allowed a deduction under section 267A? See instructions			X					
22	If "Yes," enter the total amount of the disallowed deductions								
23	Did the partnership have an election under section 163(j) for any real property trade or business or any farming								
	business in effect during the tax year? See instructions		Х						
24	Does the partnership satisfy one or more of the following? See instructions			Х					
а	The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expen-								
b	The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years	3							
	preceding the current tax year are more than \$27 million and the partnership has business interest expense.								
С	The partnership is a tax shelter (see instructions) and the partnership has business interest expense.								
	If "Yes" to any, complete and attach Form 8990.								
25	Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund?			х					
	If "Yes," enter the amount from Form 8996, line 15								
26	Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an								
	interest in the partnership or of receiving a distribution from the partnership								
	Complete Schedule K-3 (Form 1065), Part XIII, for each foreign partner subject to section 864(c)(8) on a transfer	or distribution.							
27	At any time during the tax year, were there any transfers between the partnership and its partners subject to the								
	disclosure requirements of Regulations section 1.707-8?			х					
28	Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties	3							
	constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for								
	purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the								
	foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions. Percentage: By vote: By value:			v					
20				Х					
29	Reserved for future use Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions			v					
30				X					
	If "Yes," the partnership must complete Schedule B-2 (Form 1065). Enter the total from Schedule B-2, Part III,								
	line 3								
<u> </u>	If "No," complete Designation of Partnership Representative below.								
_	nation of Partnership Representative (see instructions)								
	below the information for the partnership representative (PR) for the tax year covered by this return.								
Name	ENTITY ROOMOVENT								
	ddress 3680 54TH STREET SOUTH U.S. phone								
of PR	FARGO ND 58104 number of PR	(701)361-	5948						
If the P	PR is an entity, name of the designated individual for the PR								
	ddress of U.S. phone num								
designa	ated individual designated indivi	dual							

EEA Form **1065** (2022)

Filed 12/13/24 Entered 12/13/24 19:01:34 Desc Exhibit Case 24-30422 Doc 63-3

Jamieson capex fund 12022 Tax Return Page 4 of 8 Form 1065 (2022) 47-3653978 Schedule K **Partners' Distributive Share Items** Total amount 1 Ordinary business income (loss) (page 1, line 22) 1 (505, 574)2 Net rental real estate income (loss) (attach Form 8825) 2 (533,240)3a b Other net rental income (loss). Subtract line 3b from line 3a 3с С 4 Guaranteed payments: a Services 4a **b** Capital c Total. Add lines 4a and 4b 4c Income (Loss) 5 5 26,384 a Ordinary dividends 6 Dividends and dividend equivalents: 6a **b** Qualified dividends 6b c Dividend equivalents 7 7 8 Net short-term capital gain (loss) (attach Schedule D (Form 1065)) 8 Net long-term capital gain (loss) (attach Schedule D (Form 1065)) 9a 9a 9,987 b Unrecaptured section 1250 gain (attach statement) С 10 Net section 1231 gain (loss) (attach Form 4797) 10 89,416 11 Other income (loss) (see instructions) Type: 11 12 12 **Deductions** 13a Contributions b Investment interest expense 13b С Section 59(e)(2) expenditures: (1) Type: 13c(2) d Other deductions (see instructions) Type: Statement #14 13d 11,609 14a Net earnings (loss) from self-employment 14a (2,291)14b b С Gross nonfarm income 14c (205)15a 15a b 15b Low-income housing credit (other) Credits Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable) 15c C Other rental real estate credits (see instructions) d Type: 15d е Other rental credits (see instructions) 15e f Other credits (see instructions) Type: 15f Attach Schedule K-2 (Form 1065), Partners' Distributive Share Items-International, and check national this box to indicate that you are reporting items of international tax relevance Qualified for exception to filing Schedule K-2 17a Post-1986 depreciation adjustment 17a 62 Alternative Minimum Tax (AMT) Items b Adjusted gain or loss 17b С Depletion (other than oil and gas) 17c d Oil, gas, and geothermal properties - gross income 17d 17e е 17f 18a Tax-exempt interest income 18a b Other tax-exempt income 18b Other Information С Nondeductible expenses 18c 19a Distributions of cash and marketable securities 19a b Distributions of other property 19b 20a Investment income 20a 26,387 b Investment expenses 20b С Other items and amounts (attach statement)

EEA Form 1065 (2022)

Total foreign taxes paid or accrued

21

Statement #23

Doc 63-3 Filed 12/13/24 Entered 12/13/24 19:01:34 Case 24-30422 Desc Exhibit C - 2022 Tax Return Page 6 of 8

8825

(Rev. November 2018) Department of the Treasury Internal Revenue Service

Form

Rental Real Estate Income and Expenses of a Partnership or an S Corporation

► Attach to Form 1065 or Form 1120S. ▶ Go to www.irs.gov/Form8825 for the latest information. OMB No. 1545-0123

Name	Emplo						oyer identification number		
	JAMIESON CAPEX FUND LLC	47-3653978							
1	Show the type and address of each property.	ted at fair							
	rental value and days with personal use. See	instruc	tions. See page 2 to list	additional properties.					
	Physical address of each property - street, cir	ty, stat	e,	Type - Enter code	1-8;	atal Davis	Davis and Has Davis		
	ZIP code			see page 2 for li	st Fair Re	ntal Days	Personal Use Days		
Α									
^_									
в									
с∤									
_									
D									
			T	<u>_</u>					
	B 41B 1E 44 1			Prope					
	Rental Real Estate Income		Α	В	С		D		
2	Gross rents	2							
	Poutel Book Fatata Funancia								
	Rental Real Estate Expenses								
3	Advertising	3							
4	Auto and travel	4							
5	Cleaning and maintenance	5							
6	Commissions	6							
7	Insurance	7							
8	Legal and other professional fees	8							
9	Interest (see instructions)	9							
10	Repairs	10							
11	Taxes	11							
12	Utilities	12							
13	Wages and salaries	13							
14	Depreciation (see instructions)	14							
15	Other (list) ►	-							
	-	15							
	-	-							
40									
16	Total expenses for each property.	4.0							
47	Add lines 3 through 15	16							
17	Income or (loss) from each property. Subtract line 16 from line 2	17							
18a	Total gross rents. Add gross rents from line 2		nc A through ⊟			18a			
b	Total expenses. Add total expenses from line		•			18b (
19	Net gain (loss) from Form 4797, Part II, line 1		•			100			
13	estate activities			-		19			
20a	Net income (loss) from rental real estate activ					13			
20 a	this partnership or S corporation is a partner					20a	(533,240)		
h	Identify below the partnerships, estates, or tru					200	(333,240)		
D	20a. Attach a schedule if more space is need		III WITHOUT HOLITICOTHE (105	o, io shown on line					
	20a. / maon a sonodule il filore space is fieed	ou.							
	(1) Name CONTINUED ON PAGE 2		(2) Em	Nover identification pur	nher				
	TRIANGLE TOWNHOMES LLC		(2) Employer identification number 81-1399191 81-1565620						
	LIBERTY DEVELOPMENT LLC								
	COMMONS OF 56TH LLC 82-3350973								
21	Net rental estate income (loss). Combine line	s 18a t				21	(533,240)		
	• Form 1065 or 1120S: Schedule K, line 2						(333,210)		

Case 24-30422 Doc 63-3 Filed 12/13/24 Entered 12/13/24 19:01:34 Desc Exhibit C - 2022 Tax Return Page 7 of 8

Forr	n 8825 (Rev. 11-2018)						Page 2			
1	Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions.									
	Physical address of each property - street, cir		Type - Enter code	e 1-8;						
	ZIP code		see below for lis		Fair Rental Days	Personal Use Days				
_										
E										
F										
G										
Н										
				Prope	erties					
	Rental Real Estate Income		Е	F		G	Н			
2	Gross rents	2								
	Rental Real Estate Expenses									
3	Advertising	3								
4	Auto and travel	4								
5	Cleaning and maintenance	5								
6	Commissions	6								
7	Insurance	7								
8	Legal and other professional fees	8								
9	Interest (see instructions)	9								
10	Repairs	10								
11	Taxes	11								
12	Utilities	12								
13	Wages and salaries	13								
14	Depreciation (see instructions)	14								
15	Other (list) ▶									
		45								
		15								
16	Total expenses for each property.									
	Add lines 3 through 15	16								
17	Income or (loss) from each property.									
	Subtract line 16 from line 2	17								

Allowable Codes for Type of Property

- 1-Single Family Residence
- 2-Multi-Family Residence
- 3-Vacation or Short-Term Rental
- 4-Commercial
- 5-Land
- 6-Royalties
- 7-Self-Rental

8-Other (include description with the code on Form 8825 or on a separate statement)

EEA LINE 20b CONTINUATION Form 8825 (Rev. 11-2018)

NAME EMPLOYER ID NUMBER

 SHEYENNE 32 EAST LLC
 83-1633121

 GREENFIELD COMMONS LLC
 83-1734753

 PIONEER PLACE LLC
 81-3072228

 SHEYENNE 32 SOUTH LLC
 83-2166349

Case 24-30422

Employer identification number

OMB No. 1545-0123

SCHEDULE D (Form 1065)

Department of the Treasury Internal Revenue Service

Name of partnership

Attach to Form 1065 or Form 8865.

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Go to www.irs.gov/Form1065 for instructions and the latest information.

2022

JAMIESON CAPEX FUND LLC			4	7-365	3978	3
Did the partnership dispose of any investment(s) in a qualified opportunit	y fund during the tax	year?				Yes X No
If "Yes," attach Form 8949 and see its instructions for additional requirem	ents for reporting you	r gain or loss.				
Part I Short-Term Capital Gains and Losses - Ge	nerally Assets H	Held One Year	or Less	s (see	e inst	ructions)
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	Adj to gain (Form(s)	(g) ustment or loss f	ts from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
 Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b Totals for all transactions reported on Form(s) 8949 with Box A checked						
3 Totals for all transactions reported on Form(s) 8949 with Box C checked						
 Short-term capital gain from installment sales from Form 6252, li Short-term capital gain or (loss) from like-kind exchanges from F Partnership's share of net short-term capital gain (loss), including capital gains (losses), from other partnerships, estates, and trust Net short-term capital gain or (loss). Combine lines 1a through Form 1065, Schedule K, line 8 or 11; or Form 8865, Schedule Part II Long-Term Capital Gains and Losses - Gel 	Form 8824	short-term The short here and		4 5 6 7	soo ii	netructions)
·		ieiu wore man			300 1	•
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	to gain Form(s)	(g) justmer or loss 8949, f columr	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b						
8b Totals for all transactions reported on Form(s) 8949 with Box D checked	434,887	424,900			0	9,987
 9 Totals for all transactions reported on Form(s) 8949 with Box E checked. 10 Totals for all transactions reported on Form(s) 8949 with Box F checked 						
11 Long-term capital gain from installment sales from Form 6252, lir	ne 26 or 37			11		
 Long-term capital gain or (loss) from like-kind exchanges from F Partnership's share of net long-term capital gain (loss), including capital gains (losses), from other partnerships, estates, and trust 	orm 8824 specially allocated lo	ong-term		12 13 14		
15 Net long-term capital gain or (loss). Combine lines 8a through			- · ·			
on Form 1065, Schedule K, line 9a or 11; or Form 8865, Schedu	- : :			15		9,987
For Paperwork Poduction Act Notice see the Instructions for Form					ا عادیات	D (Form 1065) 2022